# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D NOTICE OF SALE OF SECURITIES

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
VIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	L
 OMB Number:Apr	
07053193	3.00 ===================================
DATE RECEIVED	D
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Name of Offering Chec	k if this is an amendment a	nd name has changed, and i	ndicate change.)	729	0/1/						
Voting, Redeemable Shares i	n Aristos Capital Offshore	Fund Ltd.		1010	1/46						
Filing Under (Check box(es) that	at apply):	504 🔲 Rule 505	☑ Rule 506	Section 4(6)	.OE						
Type of Filing:	Filing	ndment		מחססרסכ	)ED						
		DACIC IDENTIFICAT	TION DATA	— PROCESS	<del>SEL:</del>						
A. BASIC IDENTIFICATION DATA											
<ol> <li>Enter the information requ</li> </ol>	ested about the issuer			MAY 0.8.20	107						
Name of Issuer	k if this is an amendment an	id name has changed, and ir	ndicate change.	*C							
Aristos Capital Offshore Fund	d Ltd.			> THOMSOI	N						
				FINANCIA	L						
Address of Executive Offices		(Number and Stre	et, City, State, Zip Code	e) Telephone Number (Ir	ncluding Area Code)						
c/o Ogier Fiduciary Services	(Cayman) Limited, Queens	sgate House, South Churc	n Street, Grand								
Cayman, Cayman Islands			•								
Address of Principal Offices c/	Aristos Capital, LLC, c/o	Pilosoft (Number and Stre	et, City, State, Zip Code	e) Telephone Number (Ir	ncluding Area Code)						
(if different from Executive Office	es) 55 Broad Street,	New York, NY 10004									
Brief Description of Business:	private investment co	ompany		•							
	·										
Type of Business Organization											
☐ corpora	tion	limited partnership, already	formed	other (please specify)							
□ busines	s trust	limited partnership, to be fo	rmed (a Ca	ayman Islands exempted co	mpany)						
		Month	Year								
Actual or Estimated Date of Inc	omoration or Organization:			✓ Actual	☐ Estimated						
	, —	tooli C. Dootel Conder Abbr	L								
Jurisdiction of Incorporation or	organization: (Entertwo-let		- · · · · · · · · · · · · · · · · · · ·		7						
		CN for Canada; FN fo	or other foreign jurisdicti	ion) F N							

# GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

<u></u>	not required to respond unless the form displays a currently valid OMB control number.								
•		A. BASIC IE	DENTIFICATION DAT	A					
<ul> <li>Each beneficial own</li> <li>Each executive office</li> </ul>	ne issuer, if the iss ner having the pow cer and director of	uer has been organized wit ver to vote or dispose, or di			a class of equity securities of the issuer; rtnership issuers; and				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first,	f individual):	Aristos Capital Mana	gement LLC (Investment I	Manager)					
Business or Residence Add	ress (Number and	Street, City, State, Zip Cod	le): c/o Pilosoft, Inc. 55	Broad Street, Nev	v York, NY 10004				
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner		☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Woodard, Nelson P.,	Ph. D.						
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Cod	le): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner				
Full Name (Last name first,	if individual):	Shimunov, Lenny B.							
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Cod	le): c/o Aristos Capital,	LLC, c/o Pilosoft, l	Inc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first,	f individual):	Peng, Jeffrey K.		,					
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Cod	le): c/o Aristos Capital,	LLC, c/o Pilosoft,	Inc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner				
Full Name (Last name first,	if individual):	Jaeger, Raymond	, , , , , , , , , , , , , , , , , , ,						
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Cod	e): c/o Aristos Capital,	LLC, c/o Pilosoft, l	Inc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual):	Jagai, Lloyd							
Business or Residence Add 10004	ress (Number and	Street, City, State, Zip Cod	e): c/o Aristos Capital,	LLC, c/o Pilosoft, I	inc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, i	f individual):	Murugesu, Vijayabala	an						
Business or Residence Addi 10004	ress (Number and	Street, City, State, Zip Cod	e): c/o Aristos Capital,	LLC, c/o Pilosoft, I	nc., 55 Broad Street, New York, NY				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual):	Burton, Evan							

Business or Residence Address (Number and Street, City, State, Zip Code): 10004 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

c/o Aristos Capital, LLC, c/o Pilosoft, Inc., 55 Broad Street, New York, NY

	B. INFORMATION ABOUT OFFERING												
1. H	as the issue	er sold, or e	does the is	suer inten			redited inve pendix, Co					☐ Yes	⊠ No
2. W	hat is the m	inimum in	vestment t	hat will be	accepted	from any i	individual?					\$1,	,000,000 (may be waived)
	oes the offe	•	-	,	•							⊠ Yes	i □ No
aı oʻ aı	nter the infonce of the commiss of the commission o	ion or simi person to l state or st	lar remune be listed is ates, list th	eration for an associ ne name o	solicitation ated perso f the broke	of purcha on or agen or or deale	sers in cor t of a brok r. If more (	nnection w er or deale than five (5	ith sales o er registere 5) persons	f securities d with the to be liste	s in the SEC d are		
Full Na	me (Last na	ame first, it	findividual	) <b>N/</b>	١								
Busine	ss or Resid	ence Addr	ess (Numt	per and Sti	eet, City,	State, Zip	Code)						
Name	of Associate	ed Broker o	or Deater										
	in Which Pe theck "All S												All States
[AL		☐ [AZ]			•		□ [DE]				☐ [HI]		_
	□ [IN]	□ [IA]	□ [KS]	□ (KY)	☐ [LA]	☐ (ME)		□ [MA]	[IM]	□ [MN]	□ [MS]	[MO]	
П [М]	] [NE]	□ [NV]	□ [NH]	[NJ]	□ [NM]	□ (NY)	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]	
□ (RI)	□ [SC]	□ [SD]	□ [TN]	□ (TX)	[תח]	[TV]	□ [VA]	□ (WA)	□ (wv)	[WI]		□ [PR]	
Full Na	me (Last na	ame first, if	individual	)									
Busine	ss or Reside	ence Addr	ess (Numb	per and Str	eet, City, S	State, Zip	Code)	<del></del>					
Name	of Associate	d Broker o	or Dealer										
	in Which Pe heck "All Si								******				☐ All States
☐ [AL	□ [AK]	□ [AZ]	☐ [AR]	☐ [CA]	☐ [CO]		□ [DE]	□ [DC]	[FL]	☐ [GA]	□ (HI)	□ [ID]	
☐ [iL]	[NI]	□ [IA]	□ [KS]	□ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[IM]	☐ [MN]	☐ [MS]	☐ [MO]	
TM]	]   [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	[HO]			☐ [PA]	
☐ [RI]	□ [SC]	□ [SD]	□ [TN]	[XT]	[TU]	□ [VT]	□ [VA]	□ [WA]	[WV]	[WI]		[PR]	
Full Na	me (Last na	ıme first, if	individual	)									
Busine	ss or Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Name	of Associate	d Broker o	or Dealer					,					
	in Which Pe heck "All Si					olicit Purcl	nasers						☐ All States
□ (AL	_	_			•		□ [DE]	□ [DC]	☐ [FL]	☐ [GA]	[HI]	[CII]	<del></del>
□ (IL)	□ (IN)	□ [IA]	[KS]	☐ [KY]	[LA]	☐ [ME]		☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ (МТ	]   [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	☐ [PA]	
□ [RI]	[SC]	☐ [SD]	□ [TN]	□ [TX]	[[UT]	[VT]	□ [VA]	[WA]	[wv]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Offering Price Sold Debt.....\$ \$ Equity .......\$ 0 ☐ Common □ Preferred Convertible Securities (including warrants) ...... Partnership Interests.....\$ Voting, Redeemable shares)......\$ Other (Specify) \_ 100,000,000 14,724,878 Total..... 100,000,000 14,724,878 Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases Accredited Investors ..... Non-accredited Investors ..... Total (for filings under Rule 504 only)..... 0 Answer also in Appendix, Column 4, if filing under ULOE If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Types of Dollar Amount Type of Offering Security Sold Rule 505 ..... N/A Regulation A..... N/A **Rule 504** NΑ Total..... N/A \$ Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees..... 0 Printing and Engraving Costs....

Legal Fees..... Accounting Fees..... Engineering Fees..... Sales Commissions (specify finders' fees separately).....

Total.....

Other Expenses (identify)

0

20,157

20,157

O: OTTERMOTIMOE, NOMBER OF MATEUR	onto, Exi E	.11323	AND USE OF FIXE	CLLD	,
Question 1 and total expenses furnished in response to Part C-Question 4.a	. This differer	nce is the		<u>\$</u>	99,979,843
used for each of the purposes shown. If the amount for any purpose is not k estimate and check the box to the left of the estimate. The total of the paymo	nown, furnish ents listed mu	an st equal	Payments to Officers, Directors & Affiliates		Payments to Others
Salaries and fees			\$	_ 🗆	\$
Purchase of real estate			\$	_ 🗆	\$
Purchase, rental or leasing and installation of machinery and equipme	ent		\$	_ 🗆	\$
Construction or leasing of plant buildings and facilities			\$	_ 🗆	\$
offering that may be used in exchange for the assets or securities of	another issuer		•		
•			\$		\$
		_	\$	_	\$
		_	\$		\$99,979,843
			<u>\$</u>		\$
			\$	_	\$
			<u> </u>		<u>\$ 99,979,843</u>
Total payments Listed (column totals added)			⊠ <u>\$</u>	<u>99,979</u>	,843
D. FEDERAL	SIGNATUR	RE			
stitutes an undertaking by the issuer to furnish to the U.S. Securities and Exc	hange Comm	n. If this r ission, up	notice is filed under Rul on written request of its	e 505, the staff, the	following signature information furnished
er (Print or Type) Signature			Ι.	Date	
		~		<u>April</u>	19, 2007
ATTEN	TION				
Intentional misstatements or omissions of fact constitu	ute federal cr	iminal vi	olations. (See 18 U.S.	C. 1001.)	
C. HUEL	D. Enter the difference between the aggregate offering price given in response to 1 and total expenses furnished in response to Part C—Question 4.a adjusted gross proceeds to the issuer used for each of the purposes shown. If the amount for any purpose is not kestimate and check the box to the left of the estimate. The total of the paymente adjusted gross proceeds to the issuer used for each of the purposes shown. If the amount for any purpose is not kestimate and check the box to the left of the estimate. The total of the paymente adjusted gross proceeds to the issuer set forth in response to Part C – Question of the paymente adjusted gross proceeds to the issuer set forth in response to Part C – Question of the paymente of real estate.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipmente construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in experiment to a merger.  Repayment of indebtedness.  Working capital.  Other (specify):  Column Totals  Total payments Listed (column totals added)  D. FEDERAL  issuer has duly caused this notice to be signed by the undersigned duly autifulties an undertaking by the issuer to furnish to the U.S. Securities and Excellence of Print or Type)  tos Capital Offshore Fund Ltd.  Be of Signer (Print or Type)  Title of Signer (Print or Type)  d Jagai  Atthorized Person	Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference adjusted gross proceeds to the issuer.*  Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed lised for each of the purposes shown. If the amount for any purpose is not known, furnish isstinate and check the box to the left of the estimate. The total of the payments listed much eadjusted gross proceeds to the lissuer set forth in response to Part C – Question 4.b. a Salaries and fees.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger.  Repayment of indebtedness.  Working capital.  Other (specify):  Column Totals.  Total payments Listed (column totals added).  D. FEDERAL SIGNATUR  issuer has duly caused this notice to be signed by the undersigned duly authorized perso titutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm te issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.  Filte of Signer (Print or Type)  In of Signer (Print or Type)  Authorized Person	Enter the difference between the aggregate offering price given in response to Part C-Duestion 1 and total expenses furnished in response to Part C-Question 4.3. This difference is the adjusted gross proceeds to the issuer.  Addicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount of the adjusted gross proceeds to the power of the purposes shown. If the amount of the payments is laid must equal he adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.  Salaries and fees	Design the difference between the aggregate offering price given in response to Part C-Duestion 1 and total exponses furnished in response to Part C-Question 4.a. This difference is the adjusted gross proceeds to the issuer."  Indicate below the amount of the edjusted gross proceeds to the issuer used or proposed to be used for resident to purpose shown. If the amount of one purpose is not known formish an estimate and check the box to the left of the estimate. The total of the payments isled must equal he adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.  Payments to Officers, Directors & Amiliates  Salaries and fees	Duestion 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the adjusted grosp proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer used or roposed to be asset for each of the purposes shown. If the amount of map purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal her adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.    Payments to Officers, Directors 4 Affiliates

1.	ls any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? ☐ Yes ☑ No							
		See Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertak (17 CFR 239.500) at such times as requi	es to furnish to any state administrator of any state in which th red by state law.	is notice is filed a notice on Form D					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		he issuer is familiar with the conditions that must be satisfied to his notice is filed and understands that the issuer claiming the been satisfied.						
	ssuer has read this notification and knows the rized person.	contents to be true and has duly caused this notice to be sign	ned on its behalf by the undersigned duly					
Issue	r (Print or Type)	Signature \	Date					
Aristo	os Capital Offshore Fund Ltd.	Llonding	April 19, 2007					
Name	of Signer (Print or Type)	Title of Signer (Print or Type)	Title of Signer (Print or Type)					
Lloyd	Jagai	Authorized Person						

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

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1	2	2	3			4		5	ı		
	Intend to non-ad investors (Part B -	credited in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)						
State	Yes	No	Voting, Redeemable Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK											
AZ											
AR											
CA											
со											
СТ											
DE											
DC											
FL											
GA											
HI											
ID							· · · ·				
IL.											
IN											
IA											
KS											
KY											
LA	-	Х	\$100,000,000	1	\$500,000	0	\$0		X		
ME											
MD			0100 000 000		<b>A.</b>						
MA		Х	\$100,000,000	1	\$1,150,000	0	\$0		X		
MI								_			
MN MS											
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NE							· · . <u>.</u>	-			
NV											
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NJ		х	\$100,000,000	1	\$450,000	0	\$0	i	х		
NM				-	Ψ+30,000 —————————————————————————————————	•	Φ0				
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	···	<del>,</del>		API	PENDIX			······································			
1	2	2	3	· · · · · ·	4						
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
NY		х	\$100,000,000	1	\$124,878	0	\$0		х		
NC									!		
ND											
ОН									1		
ок											
OR											
PA											
RI											
sc											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
WV											
WI											
WY					·· <u>-</u>						
Non US		×	\$100,000,000	1	\$12,500,000	0	\$0		×		

